

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. 003300-777

Patent

2625
ifw

In re Patent Application of

Jerker Bergenek et al.

Application No.: 09/842,672

Filing Date: April 27, 2001

Title: CHECK FOR FINGERPRINTS

Group Art Unit: 2625

Examiner: SHEELA C CHAWAN

Confirmation No.: 9036

AMENDMENT/REPLY TRANSMITTAL LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ Terminal Disclaimer(s) and the ☐ \$65.00 (2814) ☐ \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.
- ☐ Also enclosed is/are _____

- ☐ Small entity status is hereby claimed.
- ☐ Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified above.
- ☐ Applicant(s) previously submitted _____

on _____,
for which continued examination is requested.

- ☐ Applicant(s) requests suspension of action by the Office until at least _____, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.
- ☐ A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.

- ☒ No additional claim fee is required.
- ☐ An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims		MINUS =	0	x \$50.00 (1202) =	\$ 0.00
Independent Claims		MINUS =	0	x \$200.00 (1201) =	\$ 0.00
If Amendment adds multiple dependent claims, add \$360.00 (1203)					
Total Claim Amendment Fee					\$ 0.00
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					\$ 0.00
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 0.00

- ☐ A check in the amount of _____ is enclosed for the fee due.
- ☐ Charge _____ to Deposit Account No. 02-4800.
- ☐ Charge _____ to credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

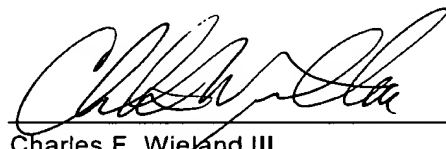
Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

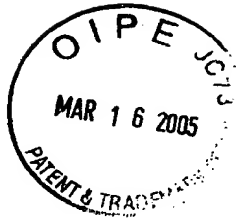
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Date: March 16, 2005

By



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For: CHECK FOR FINGERPRINTS)	

REQUEST FOR RECONSIDERATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In reply to the Office Action dated January 11, 2005, applicants respectfully request reconsideration of the above-captioned application.

The Office Action includes a rejection of claims 1, 3-14 and 16-25 under 35 U.S.C. §103 as allegedly being unpatentable over the Russo et al patent (U.S. Patent No. 6,535,622) in view of the Abtahi et al patent (U.S. Patent No. 5,509,083). This rejection is respectfully traversed.

In characterizing the Russo et al patent, the Office suggests that it discloses evaluating whether a recorded fingerprint originates from a latent fingerprint on a sensor or from a finger placed on the sensor on the basis of the location of the recorded fingerprint on the sensor. The Office also suggests that the Russo et al patent is silent as to the specific details of the sensor and particularly whether it has an integral coordinate system.